

## STATE OF SOUTH CAROLINA

(Caption of Case)

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

## COVER LETTER

DOCKET

NUMBER: 2005 - 264 - C

(Please type or print)

Submitted by: Epicus Communications Group, Inc.

SC Bar Number: \_\_\_\_\_

Telephone: 407-942-1231

Address:

610 Crescent Executive Court, Suite  
300Fax: 407-333-2859Lake Mary, FL 32746

Other: \_\_\_\_\_

Email: tosborne@epicus.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

## DOCKETING INFORMATION (Check all that apply)

☐ Emergency Relief demanded in petition☐ Request for item to be placed on Commission's Agenda expeditiously☐ Other: \_\_\_\_\_

## INDUSTRY (Check one)

- ☐ Electric  
☐ Electric/Gas  
☐ Electric/Telecommunications  
☐ Electric/Water  
☐ Electric/Water/Telecom.  
☐ Electric/Water/Sewer  
☐ Gas  
☐ Railroad  
☐ Sewer  
☒ Telecommunications  
☐ Transportation  
☐ Water  
☐ Water/Sewer  
☐ Administrative Matter  
☐ Other: \_\_\_\_\_

## NATURE OF ACTION (Check all that Apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Affidavit                 | <input type="checkbox"/> Letter                            | <input type="checkbox"/> Request                   |
| <input type="checkbox"/> Agreement                 | <input type="checkbox"/> Memorandum                        | <input type="checkbox"/> Request for Certification |
| <input type="checkbox"/> Answer                    | <input type="checkbox"/> Motion                            | <input type="checkbox"/> Request for Investigation |
| <input type="checkbox"/> Appellate Review          | <input type="checkbox"/> Objection                         | <input type="checkbox"/> Resale Agreement          |
| <input type="checkbox"/> Application               | <input type="checkbox"/> Petition                          | <input type="checkbox"/> Resale Amendment          |
| <input type="checkbox"/> Brief                     | <input type="checkbox"/> Petition for Reconsideration      | <input type="checkbox"/> Reservation Letter        |
| <input type="checkbox"/> Certificate               | <input type="checkbox"/> Petition for Rulemaking           | <input type="checkbox"/> Response                  |
| <input type="checkbox"/> Comments                  | <input type="checkbox"/> Petition for Rule to Show Cause   | <input type="checkbox"/> Response to Discovery     |
| <input type="checkbox"/> Complaint                 | <input type="checkbox"/> Petition to Intervene             | <input type="checkbox"/> Return to Petition        |
| <input type="checkbox"/> Consent Order             | <input type="checkbox"/> Petition to Intervene Out of Time | <input type="checkbox"/> Stipulation               |
| <input type="checkbox"/> Discovery                 | <input type="checkbox"/> Prefiled Testimony                | <input type="checkbox"/> Subpoena                  |
| <input type="checkbox"/> Exhibit                   | <input type="checkbox"/> Promotion                         | <input type="checkbox"/> Tariff                    |
| <input type="checkbox"/> Expedited Consideration   | <input type="checkbox"/> Proposed Order                    | <input type="checkbox"/> Other: _____              |
| <input type="checkbox"/> Interconnection Agreement | <input type="checkbox"/> Protest                           |  |
| <input type="checkbox"/> Interconnection Amendment | <input type="checkbox"/> Publisher's Affidavit             |  |
| <input type="checkbox"/> Late-Filed Exhibit        | <input checked="" type="checkbox"/> Report                 |  |



October 1, 2007  
Via U.S. Mail

2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32794-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

Docketing Department  
South Carolina Public Service Commission  
Synergy Business Park  
101 Executive Center Dr.  
Saluda Building  
Columbia, SC 29210

RE: Epicus Communications Group, Inc  
SC Authorized Utility Representative

SC PUBLIC SERVICE  
COMMISSION  
2007 OCT -2 AM 9:48  
FILED

✓

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative , filed on behalf of Epicus Communications Group, Inc. No check is enclosed as there are no remittance fees due.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Kimberly N. Geuder  
Compliance Reporting Specialist

cc: Tammy Osborne-Habyan - Epicus Communications Group, Inc

file: Epicus Communications Group, Inc - Reporting - South Carolina

# AUTHORIZED UTILITY REPRESENTATIVE FORM

TYPE: ☐ IXC

☒ CLEC

☐ ILEC

☐ Water

☐ Sewer

## CERTIFICATED COMPANY INFORMATION

Epicus Communications Group, Inc.

Company Name

FEIN/SSN:

Dbafka

Telephone #: 407-942-1231

Mailing Address: 610 Crescent Executive Court, Suite 300

Lake Mary, FL 32746

City, State, Zip Code

Same as above

Business Location

City, State, Zip Code

County: Seminole

## REGISTERED AGENT INFORMATION

Registered Agent:

Mailing Address:

City, State, Zip Code

**Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:**

A. Regulatory Officer: Tammy Osborne-Habyan

407-942-1231

/ 407-333-2859

/ tosborne@epicus.com

Telephone Number

/ Facsimile Number

/ E-mail Address

B. Customer Complaints:

407-942-1260

/ 407-333-2859

/ scolbert@epicus.com

Telephone Number

/ Facsimile Number

/ E-mail Address

CONTINUED ON BACK

C. Engineering Operations: \_\_\_\_\_

\_\_\_\_\_  
Telephone Number / Facsimile Number / E-mail Address

D. Test and Repair: \_\_\_\_\_

\_\_\_\_\_  
Telephone Number / Facsimile Number / E-mail Address

E. Emergencies: \_\_\_\_\_  
(During Non-Office Hours)

\_\_\_\_\_  
Telephone Number / Facsimile Number / E-mail Address

F. Financial: \_\_\_\_\_

\_\_\_\_\_  
Telephone Number / Facsimile Number / E-mail Address

G. Customer Contact (Toll Free) \_\_\_\_\_

Mark Schaftlein

This form was completed by

Signature

Title: CEO, Secretary, Director

Date:

9/25/07

RETURN COMPLETED FORM TO: Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

And

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
Post Office Box 11263  
Columbia, South Carolina 29211

(Rev. PSC05)